

"FEE ADDRESS" INDICATION FORM

Address to:
Mail Stop M Correspondence
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Fax to:
571-273-6500

- OR -

INSTRUCTIONS: The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. **When to check the first box below:** If you have a Customer Number to represent the fee address. **When to check the second box below:** If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.

For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:

☒ Customer Number: 23628

OR

☐ The attached Request for Customer Number (PTO/SB/125) form.

PATENT NUMBER (if known)	APPLICATION NUMBER
6,756,382	

Completed by (check one):

☐ Applicant/Inventor

☒ Attorney or Agent of record 31,616
(Reg. No.)

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96)

☐ Assignee recorded at Reel _____ Frame _____


Signature

Edward R. Gates

Typed or printed name

617.646.8000

Requester's telephone number

7/17/08
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.

Certificate of Electronic Filing Under 37 CFR 1.8

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Date: 7/17/08

Signature: 

(Brenda M. White)

Docket No.: C1271.70089US00
(PATENT)

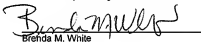
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Patrick L. Coleman et al.
Serial No.: 10/027,218
Confirmation No.: 2257
Filed: June 29, 2004
Patent No.: 6,756,382
For: AMIDE SUBSTITUTED IMIDAZOQUINOLINES

Examiner: T. N. Truong
Art Unit: 1624

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: 7/17/08


Brenda M. White

TRANSMITTAL LETTER

Mail Stop M Correspondence
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Enclosed is the following item for filing in connection with the above-referenced Patent:

1. Fee Address Indication.

The Director is hereby authorized to charge any deficiency or credit any overpayment in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper

hereafter filed in this application by this firm) to our Deposit Account No. 23/2825, under Docket No. C1271.70089US00.

Dated: 7/17/08

Respectfully submitted,

By 

Edward R. Gates

Registration No.: 31,616

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